

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	R.J.A.C.E., Inc.	
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names	DBA J.A.C.E. Daycare and Early Learning Program DBA Children's Corner Learning Center	
3. Debtor's federal Employer Identification Number (EIN)	82-2262935	
4. Debtor's address	Principal place of business 1574 Route 9 Wappingers Falls, NY 12590 Number, Street, City, State & ZIP Code Dutchess County	Mailing address, if different from principal place of business 17 Fenmore Drive Wappingers Falls, NY 12590 P.O. Box, Number, Street, City, State & ZIP Code Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code
5. Debtor's website (URL)	www.joinacreativeexperience.com	
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify:	

Debtor R.J.A.C.E., Inc. Case number (if known) _____
Name

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

☒ Chapter 7

☐ Chapter 9

☐ Chapter 11. Check **all** that apply:

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No.

☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **R.J.A.C.E., Inc.**
Name

Case number (if known)

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1,
attach a separate list

Debtor	Relationship
District _____ When _____	Case number, if known _____

11. Why is the case filed in this district?
- Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☒ No
☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds
- Check one:
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities
- | | | |
|---|---|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|---|--|

Debtor

R.J.A.C.E., Inc.

Case number (if known)

Name

☐ \$50,001 - \$100,000

☐ \$10,000,001 - \$50 million

☐ \$1,000,000,001 - \$10 billion

☒ \$100,001 - \$500,000

☐ \$50,000,001 - \$100 million

☐ \$10,000,000,001 - \$50 billion

☐ \$500,001 - \$1 million

☐ \$100,000,001 - \$500 million

☐ More than \$50 billion

Debtor **R.J.A.C.E., Inc.** Case number (if known)
Name

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 13, 2024**
MM / DD / YYYY

X /s/ Rachel Bieber
Signature of authorized representative of debtor

Title **President**

Rachel Bieber
Printed name

18. Signature of attorney

X /s/ Michelle L. Trier
Signature of attorney for debtor

Date **March 13, 2024**
MM / DD / YYYY

Michelle L. Trier 1212
Printed name

Genova, Malin & Trier, LLP
Firm name

1136 Route 9
Wappingers Falls, NY 12590
Number, Street, City, State & ZIP Code

Contact phone **845-298-1600** Email address

1212 NY
Bar number and State

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 13, 2024

X /s/ Rachel Bieber

Signature of individual signing on behalf of debtor

Rachel Bieber

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 481,450.36
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 481,450.36

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 257,051.25
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 56,657.49
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 129,477.86
4. Total liabilities Lines 2 + 3a + 3b	\$ 443,186.60

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filingOfficial Form 206A/B
Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Hudson Valley Credit UnionBusiness checking account0200\$0.003.2. Hudson Valley Credit UnionBusiness savings account0000\$0.014. **Other cash equivalents** (*Identify all*)5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.01**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

Debtor **R.J.A.C.E., Inc.** Case number (If known) _____
Name

11a. 90 days old or less: **4,949.50** - **0.00** = **\$4,949.50**
face amount doubtful or uncollectible accounts

11a. 90 days old or less: **38,734.20** - **0.00** = **\$38,734.20**
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$43,683.70

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Shelves (18), book cases (10), tall lockers (20), wall storage (12), metal storage shelves (2)	Unknown	Replacement	\$40,000.00
	High chairs (7), wood cribs (26), safe rockers (2), wood sensory table, light table, toddler tables (5), chairs (75), nesting table, art easel, preschool tables (6), large tables (6)	Unknown	Replacement	\$24,625.00
	Refridgerators (8), mini-fridge, mini microwaves (10), stove, Keurig, miscellaneous kitchen supplies	Unknown	Replacement	\$11,000.00

Debtor R.J.A.C.E., Inc. Case number (If known) _____
Name

Futon couch, desk chairs (2), reception chairs(4), office desks(3), file cabinet (3), misc office supplies		Unknown	Replacement	\$7,950.00
Outdoor playground equipment (8), privacy fencing, playhouses (5)		Unknown	Replacement	\$25,500.00
Art supplies, bulletin boards, clothing, toys/books, rugs/mats		Unknown	Replacement	\$9,850.00
Fire system, cleaning supplies, garbage cans, vacuums, tools		Unknown	Replacement	\$5,000.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software TVs (3), security system, computer, MacBooks (2), phone system,	Unknown	Replacement	\$17,300.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** **\$141,225.00**
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**
☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Debtor R.J.A.C.E., Inc. Case number (If known) _____
Name

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71.	Notes receivable Description (include name of obligor)		
72.	Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local) Anticipated Employee Retention Credit (debtor engaged Sunrise Business Solutions to pursue)	Tax year <u>2020/2021</u>	<u>\$296,541.65</u>

73. **Interests in insurance policies or annuities**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78.	Total of Part 11. Add lines 71 through 77. Copy the total to line 90.	\$296,541.65
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79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
- ☒ No
☐ Yes

Debtor R.J.A.C.E., Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.01	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$43,683.70	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$141,225.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$296,541.65	
91. Total. Add lines 80 through 90 for each column	\$481,450.36	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$481,450.36

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	Itria Ventures LLC Creditor's Name One Penn Plaza, Suite 3101 New York, NY 10119 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number 8411 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Accounts receivable Describe the lien Judgment entered 2/21/24 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$143,531.25 Unknown
2.2	OnDeck Capital Creditor's Name 1400 Broadway, 25th Floor New York, NY 10018-5225 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Debtor unsure of collateral Describe the lien Merchant capital advance loan Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$113,520.00 Unknown

Debtor **R.J.A.C.E., Inc.** Case number (if known) _____
Name

- ☒ No ☐ Contingent
☐ Yes. Specify each creditor, including this creditor and its relative priority. ☐ Unliquidated ☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$257,051.25**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Jonathan Gitlin, Esq.
One Penn Plaza, Suite 4530
New York, NY 10019

Line 2.1

Fill in this information to identify the case:

Debtor name **R.J.A.C.E., Inc.**
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Alianna Robles 1 Davies South Terrace Beacon, NY 12508</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Gross wages owed (w/e 3/8/24)</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$404.25	\$404.25
2.2	<p>Priority creditor's name and mailing address</p> <p>Alicia Gonzalez 31 South Avenue Beacon, NY 12508</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Deposit</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,474.00	\$1,474.00

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
2.3	<p>Priority creditor's name and mailing address</p> <p>Amanda Anderson 8 Wasson Drive Poughkeepsie, NY 12603</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>7</u>)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Alleged deposit</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$2,145.00 \$2,145.00</p> <hr/>
2.4	<p>Priority creditor's name and mailing address</p> <p>Amanda Schneck 16A Macfarlane Road Wappingers Falls, NY 12590</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>4</u>)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Gross wages owed (w/e 3/8/24)</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$721.14 \$721.14</p> <hr/>
2.5	<p>Priority creditor's name and mailing address</p> <p>Amanda Sen Villalobos 2754 West Main Street Wappingers Falls, NY 12590</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>7</u>)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Deposit</p> <hr/> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		<p>\$75.00 \$75.00</p> <hr/>
2.6	<p>Priority creditor's name and mailing address</p> <p>Amma Asantewaa 11 Gary Place Wappingers Falls, NY 12590</p> <hr/> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (<u>7</u>)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Deposit</p> <hr/> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p>
		<p>\$500.00 \$500.00</p> <hr/>

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.7	Priority creditor's name and mailing address Anntanet Nappi 82 Haviland Road Poughkeepsie, NY 12601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$705.60	\$705.60
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Ashley Conger 11 Hart Drive Poughkeepsie, NY 12603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$774.90	\$774.90
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Asiria Guzman 11 Pembroke Circle, Apt. B Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$261.28	\$261.28
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Candace Mansfield 603 Popula Boulevard Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$95.25	\$95.25
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.11	Priority creditor's name and mailing address Candace Mansfield 603 Popula Boulevard Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$712.50	\$712.50
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.12	Priority creditor's name and mailing address Crystal Baez 12 Victor Road Beacon, NY 12508	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,278.00	\$1,278.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit (owed to DSS) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.13	Priority creditor's name and mailing address Deanna Pagan 9D Surrey Lane Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit (owed to DSS) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.14	Priority creditor's name and mailing address Domoniqua Jackson 20 Spring Street Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$865.39	\$865.39
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.15	Priority creditor's name and mailing address Drew Cristantiello 8 Veatch Street Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$145.86	\$145.86
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.16	Priority creditor's name and mailing address Francine Packes 29 West Taconic Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$445.50	\$445.50
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.17	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,277.84	\$1,277.84
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Payroll taxes (w/e 3/8/2024) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.18	Priority creditor's name and mailing address Irina Vaccarelli 215 Lake Walton Road Hopewell Junction, NY 12533	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$950.00	\$950.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.19	Priority creditor's name and mailing address Jalyn Ramos 5 Salem Court Poughkeepsie, NY 12603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$431.88	\$431.88
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.20	Priority creditor's name and mailing address Janeth Garcia 500 NY Route 299, 18C Highland, NY 12528	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$686.40	\$686.40
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.21	Priority creditor's name and mailing address Jeandry Suarez 511 Popula Boulevard Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$737.50	\$737.50
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.22	Priority creditor's name and mailing address Jennifer Alvarez 260 Ketchamtown Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$698.87	\$698.87
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.23	Priority creditor's name and mailing address Jessica Hickey 36 Reggie Drive Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.24	Priority creditor's name and mailing address Jessica Seckler 245 Old Castle Point Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.25	Priority creditor's name and mailing address Joelle Price 8 Colonial Road, Apt. 32 Beacon, NY 12508	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,520.00	\$1,520.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.26	Priority creditor's name and mailing address Joseph Zhelkover	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$30.00	\$30.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	R.J.A.C.E., Inc. <small>Name</small>		Case number (if known)
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2.27	Priority creditor's name and mailing address Juris Pupcenoks 33 Spruce Ridge Drive Fishkill, NY 12524	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.28	Priority creditor's name and mailing address Katie Mason 3 Wessel Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$555.73	\$555.73
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.29	Priority creditor's name and mailing address Kayla Cooper 121 Cooper Road Fishkill, NY 12524	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$621.18	\$621.18
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.30	Priority creditor's name and mailing address Kayla Smith 10F Delavergne Avenue Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$420.05	\$420.05
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.31	Priority creditor's name and mailing address Keresha Streete 458 Sheafe Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$795.00	\$795.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.32	Priority creditor's name and mailing address Khalie Wood-Aker 37 Liss Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,026.00	\$1,026.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.33	Priority creditor's name and mailing address Kimberly Dickson 25 Central Avenue Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$690.22	\$690.22
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.34	Priority creditor's name and mailing address Kyra Mann 107 Mahoney Road Milton, NY 12547	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	R.J.A.C.E., Inc. <small>Name</small>		Case number (if known)
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2.35	Priority creditor's name and mailing address Ledreia Riddick 12 Brothers Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.36	Priority creditor's name and mailing address Lora Schilling 12 Elizabeth Terrace Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,275.00	\$1,275.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.37	Priority creditor's name and mailing address Marcus Interrante 55 Losee Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$32.50	\$32.50
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.38	Priority creditor's name and mailing address Marie Steinhart 323 Myers Corners Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,275.00	\$1,275.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.39	Priority creditor's name and mailing address Marie Steinhart 323 Myers Corners Road Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,150.20	\$1,150.20
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.40	Priority creditor's name and mailing address Maya Herrera 14E Academy Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,120.00	\$1,120.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	Basis for the claim: Deposit Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
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2.41	Priority creditor's name and mailing address Mia Dowd 1 Scarborough Lane Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$687.36	\$687.36
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.42	Priority creditor's name and mailing address Michael Killmer 160 Holsapple Road, Lot 136 Dover Plains, NY 12522	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$718.08	\$718.08
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.43	Priority creditor's name and mailing address Michelle Cooper 46 Market Street Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.44	Priority creditor's name and mailing address Mike Estela 38 Roundhill Road Hopewell Junction, NY 12533	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.45	Priority creditor's name and mailing address NYS Department of Taxation & Finance Civil Enforcement WA Harriman Campus Albany, NY 12227-0001	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$283.51	\$283.51
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Payroll taxes (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.46	Priority creditor's name and mailing address Olivia Tirrito 7 Frisbie Street New Fairfield, CT 06812	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$785.40	\$785.40
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.47	Priority creditor's name and mailing address Onyx Stanback 26 Chelsea Ridge Drive Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,278.00	\$1,278.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.48	Priority creditor's name and mailing address Pratik Patel	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5.00	\$5.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.49	Priority creditor's name and mailing address Quiaisha Dickerson 2 Wilbur Boulevard Poughkeepsie, NY 12603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.50	Priority creditor's name and mailing address Rachel Bieber 17 Fenmore Drive Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,000.00	\$3,000.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

Debtor	R.J.A.C.E., Inc.		Case number (if known)
	Name		

2.51	Priority creditor's name and mailing address Sadia Sahabi	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.52	Priority creditor's name and mailing address Samantha Juan 7 Ada Drive Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$200.00	\$200.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.53	Priority creditor's name and mailing address Samantha Kimble Child 20 Pierces Road, Apt. 32 Newburgh, NY 12550	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		

2.54	Priority creditor's name and mailing address Sarah Ciuto 691 Main Street, Apt. 1 Poughkeepsie, NY 12601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
	Date or dates debt was incurred	Basis for the claim: Deposit		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.55	Priority creditor's name and mailing address Selaysha Smith 5 Salem Court Poughkeepsie, NY 12603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$385.22	\$385.22
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.56	Priority creditor's name and mailing address Sharise Knight 5 Wildwood Drive, Apt. 6D Wappingers Falls, NY 12590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Basis for the claim: Deposit Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

2.57	Priority creditor's name and mailing address Stacey Hinkel 29 Hankin Loop Poughkeepsie, NY 12601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$170.78	\$170.78
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.58	Priority creditor's name and mailing address Stefan Feibel 340 Mills Cross Road Staatsburg, NY 12580	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$596.64	\$596.64
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Gross wages owed (w/e 3/8/24) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	R.J.A.C.E., Inc. Name	Case number (if known)
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2.59	Priority creditor's name and mailing address Steve Cetola 11 Wasson Drive Poughkeepsie, NY 12603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$942.22	\$942.22
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.60	Priority creditor's name and mailing address Talibah Byrd 17 Roy Lane Highland, NY 12528	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,019.24	\$1,019.24
Date or dates debt was incurred		Basis for the claim: Gross wages owed (w/e 3/8/24)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.61	Priority creditor's name and mailing address Taylor Fauteux Child 1824 Route 9G, H6 Staatsburg, NY 12580	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,475.00	\$1,475.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.62	Priority creditor's name and mailing address Xinru Lu 33 Hawk Lane Poughkeepsie, NY 12601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$39.00	\$39.00
Date or dates debt was incurred		Basis for the claim: Deposit		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (7)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	Name	Case number (if known)
	R.J.A.C.E., Inc.	
3.1	Nonpriority creditor's name and mailing address American Express PO Box 981535 El Paso, TX 79998-1535 Date(s) debt was incurred ____ Last 4 digits of account number <u>3006</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,434.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address Capital One Spark Business PO Box 4069 Carol Stream, IL 60197-4069 Date(s) debt was incurred ____ Last 4 digits of account number <u>1678</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,180.59 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address Center Management Associates, Inc. 660 White Plains Road, Suite 125 Tarrytown, NY 10591 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Previous owner (promissory note solely obligation of principal of debtor)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Central Hudson Gas & Electric 284 South Road Poughkeepsie, NY 12602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address Cintas 138 Bracken Road Montgomery, NY 12549 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$680.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract for services/goods</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address DLC Management Corp. 565 Taxter Road, #400 Elmsford, NY 10523 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$63,344.66 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent arrears</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Forward Financing 53 State Street, 20th Floor Boston, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29,325.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Merchant capital advance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	R.J.A.C.E., Inc. Name _____	Case number (if known) _____
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3.8	Nonpriority creditor's name and mailing address Hudson Valley Credit Union P.O. Box 1071 Poughkeepsie, NY 12602-1071 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,519.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Overdraft</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address SolvDebt, LLC 254 Chapman Road, Suite 208 Newark, DE 19702 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business consolidation plan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address U.S. Small Business Administration 26 Federal Plaza, Suite 3100 New York, NY 10278 Date(s) debt was incurred _____ Last 4 digits of account number <u>8707</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$17,600.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address United AC, Refrigeration, Plumbing & Hea 201 Ann Street, #1 Newburgh, NY 12550 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,943.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address US Foods Inc. 9399 W Higgins Road, ste 500 Des Plaines, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address Veith Electric LLC Attn: President 130 Salt Point Turnpike Poughkeepsie, NY 12603 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address Xerox Corporation 201 Merritt 7 Norwalk, CT 06851-1056 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$450.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business contract/services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor **R.J.A.C.E., Inc.** Case number (if known) _____
Name

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Handel & Carlini 1984 New Hackensack Road Poughkeepsie, NY 12603	Line 3.6	—
		<input type="checkbox"/> Not listed. Explain _____	

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ 56,657.49
5b. Total claims from Part 2	5b. + \$ 129,477.86
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ 186,135.35

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Contract for goods**

State the term remaining

List the contract number of any government contract _____

**Cintas
138 Bracken Road
Montgomery, NY 12549**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Copier lease**

State the term remaining

List the contract number of any government contract _____

**Xerox Corporation
201 Merritt 7
Norwalk, CT 06851-1056**

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Rachel Bieber
17 Fenmore Drive
Wappingers Falls, NY 12590

**Miscellaneous
creditors**

☐ D _____
☐ E/F _____
☐ G _____

Fill in this information to identify the case:

Debtor name R.J.A.C.E., Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2024 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$250,000.00

For prior year:
From 1/01/2023 to 12/31/2023

☒ Operating a business
☐ Other _____

\$1,700,000.00

For year before that:
From 1/01/2022 to 12/31/2022

☒ Operating a business
☐ Other _____

\$1,503,638.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor **R.J.A.C.E., Inc.**

Case number (if known)

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Itria Ventures LLC v. R.J.A.C.E., Inc. et al Index No. 2024-50765	Judgment (entry of confession of judgment)	Dutchess County Supreme Court 10 Market Street Poughkeepsie, NY 12601	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Debtor R.J.A.C.E., Inc.

Case number (if known) _____

Description of the property lost and how the loss occurred**Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss**Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer?
Address

If not money, describe any property transferred

Dates

Total amount or value

11.1. **Genova, Malin & Trier, LLP**
1136 Route 9
Wappingers Falls, NY 12590

Attorneys' Fees

March 6,
2024

\$3,000.00

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device

Describe any property transferred

Dates transfers were made

Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer?
Address

Description of property transferred or payments received or debts paid in exchange

Date transfer was made

Total amount or value

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy
From-To

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

Debtor R.J.A.C.E., Inc.

Case number (if known) _____

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor providesIf debtor provides meals
and housing, number of
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

Financial Institution name and
AddressLast 4 digits of
account numberType of account or
instrumentDate account was
closed, sold,
moved, or
transferredLast balance
before closing or
transfer**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

Depository institution name and address

Names of anyone with
access to it
Address

Description of the contents

Does debtor
still have it?**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with
access to it

Description of the contents

Does debtor
still have it?**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

Debtor **R.J.A.C.E., Inc.**

Case number (if known)

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
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Debtor R.J.A.C.E., Inc.

Case number (if known) _____

Name and address		Date of service From-To
26a.1.	JD CPA, PC 3 Nancy Court, Suite 5 Wappingers Falls, NY 12590	2017 - present
26a.2.	Merritt Bookkeeping	2017 - present (Monthly Quickbooks reconciliation)

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
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26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Rachel Bieber	17 Fenmore Drive Wappingers Falls, NY 12590	President	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Debtor R.J.A.C.E., Inc.

Case number (if known) _____

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Rachel Bieber 17 Fenmore Drive Wappingers Falls, NY 12590	\$25,000	March, 2023 - February, 2024	Salary
	Relationship to debtor President			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 13, 2024/s/ Rachel Bieber

Signature of individual signing on behalf of the debtor

Rachel Bieber

Printed name

Position or relationship to debtor PresidentAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

**United States Bankruptcy Court
Southern District of New York**

In re **R.J.A.C.E., Inc.** Debtor(s) Case No. _____
Chapter **7**

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **March 13, 2024** **/s/ Rachel Bieber**
Rachel Bieber/President
Signer/Title

ALIANNA ROBLES
1 DAVIES SOUTH TERRACE
BEACON, NY 12508

ALICIA GONZALEZ
31 SOUTH AVENUE
BEACON, NY 12508

AMANDA ANDERSON
8 WASSON DRIVE
POUGHKEEPSIE, NY 12603

AMANDA SCHNECK
16A MACFARLANE ROAD
WAPPINGERS FALLS, NY 12590

AMANDA SEN VILLALOBOS
2754 WEST MAIN STREET
WAPPINGERS FALLS, NY 12590

AMERICAN EXPRESS
PO BOX 981535
EL PASO, TX 79998-1535

AMMA ASANTEWAA
11 GARY PLACE
WAPPINGERS FALLS, NY 12590

ANNTANET NAPPI
82 HAVILAND ROAD
POUGHKEEPSIE, NY 12601

ASHLEY CONGER
11 HART DRIVE
POUGHKEEPSIE, NY 12603

ASIRIA GUZMAN
11 PEMBROKE CIRCLE, APT. B
WAPPINGERS FALLS, NY 12590

CANDACE MANSFIELD
603 POPULA BOULEVARD
WAPPINGERS FALLS, NY 12590

CAPITAL ONE SPARK BUSINESS
PO BOX 4069
CAROL STREAM, IL 60197-4069

CENTER MANAGEMENT ASSOCIATES, INC.
660 WHITE PLAINS ROAD, SUITE 125
TARRYTOWN, NY 10591

CENTRAL HUDSON GAS & ELECTRIC
284 SOUTH ROAD
POUGHKEEPSIE, NY 12602

CINTAS
138 BRACKEN ROAD
MONTGOMERY, NY 12549

CRYSTAL BAEZ
12 VICTOR ROAD
BEACON, NY 12508

DEANNA PAGAN
9D SURREY LANE
WAPPINGERS FALLS, NY 12590

DLC MANAGEMENT CORP.
565 TAXTER ROAD, #400
ELMSFORD, NY 10523

DOMONIQUE JACKSON
20 SPRING STREET
WAPPINGERS FALLS, NY 12590

DREW CRISTANTIELLO
8 VEATCH STREET
WAPPINGERS FALLS, NY 12590

FORWARD FINANCING
53 STATE STREET, 20TH FLOOR
BOSTON, MA 02109

FRANCINE PACKES
29 WEST TACONIC ROAD
WAPPINGERS FALLS, NY 12590

HANDEL & CARLINI
1984 NEW HACKENSACK ROAD
POUGHKEEPSIE, NY 12603

HUDSON VALLEY CREDIT UNION
P.O. BOX 1071
POUGHKEEPSIE, NY 12602-1071

INTERNAL REVENUE SERVICE
P.O. BOX 7346
PHILADELPHIA, PA 19101-7346

IRINA VACCARELLI
215 LAKE WALTON ROAD
HOPEWELL JUNCTION, NY 12533

ITRIA VENTURES LLC
ONE PENN PLAZA, SUITE 3101
NEW YORK, NY 10119

JALYN RAMOS
5 SALEM COURT
POUGHKEEPSIE, NY 12603

JANETH GARCIA
500 NY ROUTE 299, 18C
HIGHLAND, NY 12528

JEANDRY SUAREZ
511 POPULA BOULEVARD
WAPPINGERS FALLS, NY 12590

JENNIFER ALVAREZ
260 KETCHAMTOWN ROAD
WAPPINGERS FALLS, NY 12590

JESSICA HICKEY
36 REGGIE DRIVE
WAPPINGERS FALLS, NY 12590

JESSICA SECKLER
245 OLD CASTLE POINT ROAD
WAPPINGERS FALLS, NY 12590

JOELLE PRICE
8 COLONIAL ROAD, APT. 32
BEACON, NY 12508

JONATHAN GITLIN, ESQ.
ONE PENN PLAZA, SUITE 4530
NEW YORK, NY 10019

JOSEPH ZHELKOVER

JURIS PUPCENOKS
33 SPRUCE RIDGE DRIVE
FISHKILL, NY 12524

KATIE MASON
3 WESSEL ROAD
WAPPINGERS FALLS, NY 12590

KAYLA COOPER
121 COOPER ROAD
FISHKILL, NY 12524

KAYLA SMITH
10F DELAVERGNE AVENUE
WAPPINGERS FALLS, NY 12590

KERESHA STREETE
458 SHEAFE ROAD
WAPPINGERS FALLS, NY 12590

KHALIE WOOD-AKER
37 LISS ROAD
WAPPINGERS FALLS, NY 12590

KIMBERLY DICKSON
25 CENTRAL AVENUE
WAPPINGERS FALLS, NY 12590

KYRA MANN
107 MAHONEY ROAD
MILTON, NY 12547

LEDREIA RIDDICK
12 BROTHERS ROAD
WAPPINGERS FALLS, NY 12590

LORA SCHILLING
12 ELIZABETH TERRACE
WAPPINGERS FALLS, NY 12590

MARCUS INTERRANTE
55 LOSEE ROAD
WAPPINGERS FALLS, NY 12590

MARIE STEINHART
323 MYERS CORNERS ROAD
WAPPINGERS FALLS, NY 12590

MAYA HERRERA
14E ACADEMY
WAPPINGERS FALLS, NY 12590

MIA DOWD
1 SCARBOROUGH LANE
WAPPINGERS FALLS, NY 12590

MICHAEL KILLMER
160 HOLSAPPLE ROAD, LOT 136
DOVER PLAINS, NY 12522

MICHELLE COOPER
46 MARKET STREET
WAPPINGERS FALLS, NY 12590

MIKE ESTELA
38 ROUNDHILL ROAD
HOPEWELL JUNCTION, NY 12533

NYS DEPARTMENT OF TAXATION & FINANCE
CIVIL ENFORCEMENT
WA HARRIMAN CAMPUS
ALBANY, NY 12227-0001

OLIVIA TIRRITO
7 FRISBIE STREET
NEW FAIRFIELD, CT 06812

ONDECK CAPITAL
1400 BROADWAY, 25TH FLOOR
NEW YORK, NY 10018-5225

ONYX STANBACK
26 CHELSEA RIDGE DRIVE
WAPPINGERS FALLS, NY 12590

PRATIK PATEL

QUIAISHA DICKERSON
2 WILBUR BOULEVARD
POUGHKEEPSIE, NY 12603

RACHEL BIEBER
17 FENMORE DRIVE
WAPPINGERS FALLS, NY 12590

SADIA SAHABI

SAMANTHA JUAN
7 ADA DRIVE
WAPPINGERS FALLS, NY 12590

SAMANTHA KIMBLE CHILD
20 PIERCES ROAD, APT. 32
NEWBURGH, NY 12550

SARAH CIUTO
691 MAIN STREET, APT. 1
POUGHKEEPSIE, NY 12601

SELAYSHA SMITH
5 SALEM COURT
POUGHKEEPSIE, NY 12603

SHARISE KNIGHT
5 WILDWOOD DRIVE, APT. 6D
WAPPINGERS FALLS, NY 12590

SOLVDEBT, LLC
254 CHAPMAN ROAD, SUITE 208
NEWARK, DE 19702

STACEY HINKEL
29 HANKIN LOOP
POUGHKEEPSIE, NY 12601

STEFAN FEIBEL
340 MILLS CROSS ROAD
STAATSBURG, NY 12580

STEVE CETOLA
11 WASSON DRIVE
POUGHKEEPSIE, NY 12603

TALIBAH BYRD
17 ROY LANE
HIGHLAND, NY 12528

TAYLOR FAUTEUX CHILD
1824 ROUTE 9G, H6
STAATSBURG, NY 12580

U.S. SMALL BUSINESS ADMINISTRATION
26 FEDERAL PLAZA, SUITE 3100
NEW YORK, NY 10278

UNITED AC, REFRIGERATION, PLUMBING & HEA
201 ANN STREET, #1
NEWBURGH, NY 12550

US FOODS INC.
9399 W HIGGINS ROAD, STE 500
DES PLAINES, IL 60018

VEITH ELECTRIC LLC
ATTN: PRESIDENT
130 SALT POINT TURNPIKE
POUGHKEEPSIE, NY 12603

XEROX CORPORATION
201 MERRITT 7
NORWALK, CT 06851-1056

XINRU LU
33 HAWK LANE
POUGHKEEPSIE, NY 12601